•		REPORTS INVENT	IORY		752/	
PREPARE IN DUPLICATE					DDS/08-050	
1. TITLE OF REPORT (if a fill-in report include Form No.)					2. TYPE STATISTICAL	
Trip Reports (TDY)					REPORT X NARRATIVE	<u> </u>
1110 1101	90200 (222)				MACHINE-NAME LISTIN	3
3. FUNCTIONAL AREA		PERSONNEL .	TRAININ		ADMIN. GENERAL	
		OGISTICS	SECURIT	Υ	OTHER (specify)	
		MEDICAL	FINANCE		1 COMMUNICATIONS	
4. NO. OF COPIES PREPARED		• FREQUENCY (weekly	, monthly, quar	terly, etc.)	6. DISTRIBUTION (No. of components not number of copies)	
3		Aperiodically		2		
		. ADP PROCESSING		9. DI	RECTIVE AUTHORITY REQUIRING REPORT	
comput er pri	nt-out, etc)	YES IF YES G	IVE ADP PROCESSI			
Memoran	dum	X 110			Per C/OC-SCD	
10. PREPARING CO contributing	MPONENT (incluing information t		Form No.	, or nomenclat	total number and identify by Title, ure. Attach separate sheet if necessary	r-)
OC/SCD/All Branches/Sections Feeder to OC-O Staffs & Internal OC-SCD						
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			12. COST F			
		A. MANUAL	PREPARATION		V COSTS	
GRADE	HOUR LY Rat e	X HOURS PER	COST PER REPORT	X TIMES PREPARED	COST PER YEAR	
GS-11(5)	\$6.49	1	\$6.49	200	\$1,298.00	
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GS+05	3.15	•5	1.58	200	316.00	
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GS-17	14.77	.1	1.47	200	294.00	
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		B. COSTS	OF COMPUTER	PRODUCED R	EPORTS	
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TOTAL COSTS PER YEAR					\$1,908.00	
12 00401575 051	TALLED HISTIEL	CATION FOR THIS REP	ORT (in addition	n to directive	or authority cited in item 9). IF KNOW	۸N,
INCLUDE DATE	REPORT WAS F	IRST STARTED AND CO	MPONENT WHO EST	ABLISHED REQUI	REMENT.	٠